

9590 9402 7360 2028 8519 43

United States Postal Service

60X60

Mail Fees Paid

Permit No. G-10

• Sender: Please print your name, address, and ZIP+4® in this box•

Anthony D. Wilson
6862 state route 7
Kinsman, OH 44428

FILED

SEP 18 2023

U.S. DISTRICT COURT
NORTHERN DISTRICT OF OHIO
YOUNGSTOWN

4:23 CV 1501

SENDER: COMPLETE THIS SECTION

- Complete items 1, 2, and 3.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

All Elite Wrestling
1 Tira Bank Field Dr.
Jacksonville, Florida 32202

9590 9402 7360 2028 8519 43

2. Article Number (Transfer from service label)

9589 0710 5270 1040 1868 36

COMPLETE THIS SECTION ON DELIVERY

A. Signature

X *K. Clark*

☐ Agent
☐ Addressee

B. Received by (Printed Name)

K. Clark

C. Date of Delivery

9/1/23

D. Is delivery address different from item? ☐ Yes
If YES, enter delivery address below: ☐ No

3. Service Type

☐ Adult Signature
☐ Adult Signature Restricted Delivery
☐ Certified Mail®
☐ Certified Mail Restricted Delivery
☐ Collect on Delivery
☐ Collect on Delivery Restricted Delivery
☐ Insured Mail
☐ Insured Mail Restricted Delivery (over \$500)

☐ Priority Mail Express®
☐ Registered Mail™
☐ Registered Mail Restricted Delivery
☐ Signature Confirmation™
☐ Signature Confirmation Restricted Delivery

PS Form 3811, July 2020 PSN 7530-02-000-9053

Domestic Return Receipt